

16/25

The West Bengal University of Health Sciences
MBBS 3rd Professional Part II Examination, March - April 2025
(Old Regulation)

Subject: Medicine
Paper: II

Full Marks: 60
Time : 2 ¹/₂ hours

Attempt all questions.

The figures in the margin indicate full marks in each question.

1. What is Epilepsy? Enumerate different causes of it. Discuss briefly the management of Status Epilepticus. 2+3+5
2. Answer **any one** of the following:
 - a) Briefly discuss the clinical features, diagnosis and management of iron deficiency anemia. 3+7
 - b) A 46 year old lady has presented with a history of palpitation and weight loss for the last three months. On examination she is found to have a smooth swelling in front of the neck which moves with deglutition. How will you approach this patient to make a diagnosis? Briefly outline the management of this patient. 5+5
3. Write short notes on **any five** the following: 5 x 4
 - a) Megaloblastic Anemia.
 - b) Chancroid.
 - c) Post exposure prophylaxis for HIV infection.
 - d) Hyperosmolar non-ketotic coma.
 - e) Interpretation of pulmonary function test.
 - f) Adult immunization.
 - g) Bell's palsy.
4. Write short notes on **any five** of the following: 5 x 4
 - a) Hypercalcemia.
 - b) Pemphigus.
 - c) Clinical feature of motor neuron disease.
 - d) Treatment of Depression.
 - e) Types of tremor.
 - f) Horner's syndrome.
 - g) Common side effects of 1st line anti-tubercular drugs.

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MBBS 3rd Professional Part-II Examination (New Regulation)
March - April 2025

Subject: Pediatrics**Full Marks : 100****Time : 3 hours**

Attempt all questions. The figures in the margin indicate full marks.

1. a) What are the anatomical types of Ventricular septal defect? Discuss in brief the clinical features, hemodynamics, natural course and complications of Ventricular septal defect. How will you manage a two year old child with ventricular septal defect?
2+2+3+2+3+3
- b) A 4 year old baby girl is brought to the ER with 3 days history of cola colored scanty urine. On examination, her BP is found to be high. What is the provisional diagnosis? Mention two features you will try to elicit in past history. Mention the commonest etiological agent involved. Mention at least three complications of this condition. Enumerate the lab investigations to confirm your diagnosis. Describe the management of such a case.
1+2+1+3+4+4
2. Answer the following:
 - a) Discuss the etiopathogenesis, clinical features and management of Pyogenic meningitis in children.
3+2+5
 - b) What is the WHO classification of Xerophthalmia? Write in brief The National Prophylaxis Program against Nutritional Blindness.
5+5
 - c) Describe briefly bilirubin metabolism in relation to physiological jaundice in newborn. A 5 days old term baby has presented with jaundice noted on 2nd day of life delivered at home. Enumerate the possible causes. How will you approach for diagnosis and management?
3+2+5
3. Write short notes on the following:
2 x 5
 - a) Ethical consideration when we counsel the parents of a child with Down's syndrome.
 - b) Developmental milestone of a normal child of one year of age.
4. Explain the following statements:
5 x 4
 - a) Diuretics should be used judiciously to reduce edema in nephrotic syndrome.
 - b) A baby on exclusive breast feeding does not need to be fed water in the first few months of life even in summer months.
 - c) Premature babies are more prone for hypothermia than term babies.
 - d) Zero dose (birth dose) of Hep B vaccine should be given to all neonates.
 - e) Platelet transfusion does not help much in ITP.

5. Choose the correct option for each of the following:

10x1

i) Fast breathing at 2 months to one year of age when respiratory rate is:

- a) 60 and above
- b) 50 and above
- c) 40 and above
- d) 30 and above

ii) Moderate transfusion regimen in Thalassemia is defined as when pre-transfusion hemoglobin level is maintained between:

- a) 8-9.5 gm/dl
- b) 10-11.5 gm/dl
- c) 9-10.5 gm/dl
- d) 11-12.5 gm/dl

iii) A 5 year old child has presented with intellectual disability. On examination, he has the features of mongoloid slant of eyes, sandal gap of toes and clinodactyly of little finger. Which chromosomal anomaly is seen in Karyotyping?

- a) Trisomy 13
- b) Trisomy 18
- c) Trisomy 21
- d) XXY Syndrome

iv) Which of the following congenital infections causes periventricular calcification?

- a) Herpes Simplex
- b) Cytomegalovirus
- c) Rubella
- d) Varicella Zoster

v) Moderate acute malnutrition is identified by:

- a) Mental apathy
- b) Skin changes
- c) Bilateral pedal edema
- d) Anthropometry

vi) Which of the following is not a sign of raised intracranial tension?

- a) Sunset sign
- b) Bulging anterior fontanelle
- c) 6th cranial nerve palsy
- d) Hypotension

vii) According to WHO, cold stress in a neonate is defined as:

- a) Core temperature less than 32 deg C
- b) Core temperature between 32 deg C - 35.7 deg C
- c) Core temperature between 36.5 deg C - 37 deg C
- d) Core temperature between 36 deg C - 36.4 deg C

viii) BCG vaccination reduces incidence of:

- a) Miliary TB
- b) Primary complex
- c) Congenital TB
- d) Lymph node TB

ix) Drug of choice for absence seizure is:

- a) Sodium valproate
- b) ACTH
- c) Ethosuximide
- d) Carbamazepine

x) The commonest cause of hypokalemia in children is:

- a) Acute gastroenteritis
- b) Use of loop diuretics
- c) Diabetic ketoacidosis
- d) Distal tubular acidosis